Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control nu Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) **NUMBER FILED** NUMBER EXTRA **FOR** RATE FEE **RATE** FEI **BASIC FEE** (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X S OR INDEPENDENT CLAIMS minus 3 =X \$ (37 CFR 1.16(b)) OR X \$ (37 CFR 1.16(d)) MULTIPLE DEPENDENT CLAIM PRESENT OR + 5 + \$ = TOTAL TOTAL \* If the difference in column 1 is less than zero, enter "0" in column 2. OR CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST AMENDMENT A **PRESENT** RATE REMAINING NUMBER ADDI-RATE ADD **EXTRA** TIONAL TION **AFTER PREVIOUSLY** FEE **AMENDMENT** PAID FOR FEE Total Minus = (37 CFR 1.16(c)) OR Independent Minus Ξ (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 3) (Column 1) (Column 2) **CLAIMS HIGHEST**  $\omega$ **PRESENT** RATE ADDI-RATE ADDI REMAINING NUMBER **AMENDMENT** AFTER **PREVIOUSLY EXTRA** TIONAL TIONA FEE AMENDMENT PAID FOR FEE Total Minus Z (37 CFR 1,16(c)) X \$ X \$ OR Independent (37 CFR 1.16(b)) Minus X S X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST **PRESENT** REMAINING NUMBER PREVIOUSLY **EXTRA AFTER** OR

Z		AMENDMENT		PAID FOR	i
DME	Total (37 CFR 1.16(c))	•	Minus	••	=
EN	Independent (37 CFR 1.16(b))	•	Minus .	•••	Ξ
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(d))				

	RATE	ADDI- TIONAL FEE	
	x \$=		OR
	× \$=		OR
	+ \$=		OR
•	TOTAL ADD'L FEE		OR

RATE	ADDI TIONA FEE
x \$=	
x \$=	
+ \$=	
TOTAL ADD'L FEE	

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.